Case 1:07-cv-07197

Document 10 Filed 03/17/2008 Process RECEIPT AN

U.S. Department of Justice United States Marshals Service

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

DI A INDIVIDI	COURT CASE NUMBER	
PLAINTIFF	COURT CASE NUMBER	
Wardell Bright a.k.a Wydell Bright DEFENDANT	TYPE OF PROCESS	17
Melondez, et al.	s/c	
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OF	DESCRIPTION OF PROPERTY TO	SEIZE OR CONDEMN
Chicago Police Officer R. Corona #7852		
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		
AT CPD, C/O P. Martin, Supv. of Subpoenss, 3510	S. Michigan Ave., Chi	cago,IL 60653
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: Number of process to be		
_	served with this Form - 285	1 -
Wardell bright, #2007-0072575	Number of parties to be	_
Cook County Jail	served in this case	2
P.O. Box 089002 Chicago, IL 60608	Lorence :	
	Check for service on U.S.A.	0
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING	SERVICE (Include Business and Al	Iternate Addresses, All
Telephone Numbers, and Estimated Times Available For Service): Fold		
Mar 17, 2007		
MAR 1 7 2008		
MAR 1 / 2000		
MICHAEL W. DOBBINS		
	CLERK, U.S. DISTRICT	
Signature of Attorney or other Originator requesting service on behalf of:	TELEPHONE NUMBER	DATE
□ DEFENDANT		02-11-08
ATTOCK TO THE PARTY OF THE PART		- Tryanco i valic
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO		V THIS LINE
I acknowledge receipt for the total number of process indicated. Total Process District District Signature of Author of Origin to Serve	rized USMS Deputy or Clerk	TD Date
(Sign only first USM 285 if more 2 of 2		0211-08
and the Using 26.5 Saturmated)		
I hereby certify and return that I \square have personally served, \square have legal evidence of service. Thave even the individual, company, corporation, etc., at the address shown above or on the individual, company	kecuted as shown in "Remarks", the pr y, corporation, etc., shown at the addre	ocess described ess inserted below.
, , , , , , , , , , , , , , , , , , ,		
I hereby certify and return that I am unable to locate the individual, company, corporation, et	c., named above (See remarks below	···
Name and title of individual served (if not shown above)		itable age and dis- iding in the defendant's
Mary Beth Majkor Couralegal)	usual place of	
Address (complete only if different than shown above)	Date of Service 1	ime am
	1/10/08/	, ya Cpm
	Signature of 10.SAN	darshal or Deputy
Service Fee Total Mileage Charges Forwarding Fee Total Charges Advance Deposits	Amount owed to U.S. Marshal or	Applyant of Refund
The Son Ico Per Charact Some	. Caso a lox	Estion .
REMARKS: CO COOCASE Stood +4	2 -0-0- 1 -0-0	
REMARKS: See process sheet # 1 for	ur unargys.	